	□Failed □Closed □IHH State of Maine Health Inspection Report Page 1 of 5															
_	<del>-</del>					Critical Violations						2	Date		12/28/2	
AS Authorized by 22 million g 2400					Non-Critical Violations  Certified Food Protection Manager						2 Y	Time In		3:45 P 4:15 P		
License Expiry Date/EST. ID# Address									Zip Code	<u> </u>	Teleph		-1.10	<del>'''</del>		
3/16/2019 / 19202 49 LISBON ST					1 -			04240		617-2		288				
License Type Owner Name					Purpose of Inspection License Pos				ted	Ris	k Cate	egory				
MUN - EATING AND CATERING FUEL INC						New Establishment Report No										
			FOOL	DBORNE ILLNESS RISK FA	СТО	RS A	AND	) Pl	JBLIC H	EALTH INTER	VENTIONS	3				
	_	irolo dociai	nated compliance status	(IN, OUT, N/O, N/A) for each number	arad it	nm.				Mark"X" in approp	riata hay far (	206 an	d/or P			
		in cie desigi= in complian=					le			S=corrected on-site				eat vid	olation	
_					cos			Con	npliance S				-1-			os R
Co	mpi	iance Statu		upervision	1000	-		0011	<u> </u>	entially Hazardous	Food Time/T	emper	ature		ļo.	,3   ··
1		IN	PIC present, demonstra	ates knowledge, and		П	16 IN Proper cooking time & temperatures									
			performs duties	loyee Health	17 IN Proper reheating procedu								+			
2		IN	Management awarenes	ss; policy present	$\Box$	口	18 19		IN IN	Proper cooling Proper hot hold			es		<u> </u>	+
3		IN		, restriction & exclusion	$\perp$	Ц	20		IN	Proper cold holding temperatures						+
4		IN		jienic Practices drinking, or tobacco use	Т	Н	21		IN	Proper date marking & disposition						
5		IN	No discharge from eyes			口	22		IN	Time as a public health control: procedures & record						
				mination by Hands	-						mer Advisory					_
6		IN	Hands clean & properly	•	+	Н	23 OUT Consumer advisory provided for raw or undercooked foods									
7		IN	alternate method prope	vith RTE foods or approved						Highly Susce		tions				
8		IN		g facilities supplied & accessible		П	24		IN	Pasteurized for			d foods r	ot		Т
			Approved Source					offered								_
9		IN	Food obtained from app	proved source		Ш	25		INI		Chemical					-
10		IN	Food received at prope	er temperature		Ц	26		IN IN	Food additives Toxic substance				nd 8. 11	lead	+
11		IN		Food in good condition, safe, & unadulterated						Conformance with				u & u	iseu	
Required records available: shellstock tags parasite destruction						27			Compliance wi				cess.	$\overline{}$	Т	
			<u> </u>	om Contamination			21		IN	& HACCP plan		.,		,		
13 IN Food separated & protected				П	T	Riel	k Factors	are improper pra	ctices or proce	dures in	lentified s	s the r	most	1		
14		IN Food-contact surfaces: cleaned and sanitized				П				ributing factors of 1	•					
II I Proper disposition of returned previously served I I I I							are control measure									
			Teconationea, & ansat	GOOD I	DET/			CTI	ICES							_
			Good Retail Practices are	preventative measures to control the				_		s, and physical obje	ects into foods.					
Ma	rk ")	(" in box if n	umbered item is not in com	pliance Mark "X" in appropriate	e box f	or CC	OS an	nd/or	R CC	S=corrected on-site	e during inspec	ction	R=repe	at viol	ation	
					cos	1 1	T				<u> </u>		· ·		cc	os R
			Safe Food and	Water						Proper Us	se of Utensils					_
28	IN	Pasteurize	d eggs used where requ	ired	Т	П	41	IN	In-use ute	ensils: properly sto						Т
29	IN	Water & ic	e from approved source				42	IN		equipment, & line		stored,	dried, 8	hand	lled	
30	IN	Variance o	btained for specialized p				43	IN	Single-us	e & single-service	articles: pro	perly s	tored &	used		
			Food Temperature (				44	IN	Gloves us	sed properly						
31	IN	Proper cod temperatu	oling methods used; ade re control	quate equipment for					Each o -	Utensils, Equip						T
32	INI	•	properly cooked for hot	holding		Н	45	IN		on-food contact su designed, constru						
33	IN		thawing methods used	Holding		H	46	IN		hing facilities: ins	•		& used: t	est st	rips	$\top$
-	IN		eters provided and accur	ate			47	-		contact surfaces		,	, .			$\top$
			Food Identificati	on						Physic	al Facilities					
35	IN	Food prop	erly labeled; original con	tainer			48	IN	Hot & col	d water available;	adequate pro	essure				
			Prevention of Food Cont	tamination			49	-		installed; proper						_
	36 IN Insects, rodents, & animals not present			+	$\vdash \vdash$	50 N Sewage & waste water properly disposed						+				
37 N Contamination prevented during food preparation, storage & display					+	$\vdash$	51 IN Toilet facilities: properly constructed, supplied, & cleaned  52 IN Garbage & refuse properly disposed; facilities maintained					+				
38 39							52 53	-		& refuse properly facilities installed,				iea		+
-	40 IN Washing fruits & vegetables							-		e ventilation & ligh				]		+
Ť				A Month.	/ /	//-	54									
Per	son	in Charge (	Signature)	AMATI XXX	agkw	41					Date:	12/28/	2018			
		nspector (S		20: 40/		f					22.0.					
		LACHANCE	• ,	(/)ours//Sourca	grand and the second	~			Follov	v-up: YES	NO D	ate of I	Follow-u	p:		
	COLO ENGLINATOR															

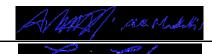
	State of Maine	Hea	ılth Inspect	ion Repor	t	Page 2 of 5		
Establishment Name COWBELL GRILL & TAP			As Authorized by 22 MRSA § 2496			Date 12/28/2018		
License Expiry Date/EST. ID# Address 3/16/2019 / 19202 49 LISBON ST			City / State LEWISTON	/ ME	Zip Code 04240	Telephone 617-240-7288		
Temperature Observations								
Location	Temperature			Notes				

Temperature Observations								
Location	Temperature	Notes						
Water temp	34*	2 door reach in, bottom						
Water temp	40*	True upright coler						
Water	121*	Hand sink						
Water temp	38*	Walk in cooler						
Water temp	35*	Deli reach in, bottom shelving						
Air temp	39*	Beverage cooler, bar area						
Water temp	34*	2 door deli unit, top						
Air temp	40*	Beverage cooler, wait station						
Water temp	35*	Deli reach in, top insert						
Water temp	36*	True, double door						

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE



Date: 12/28/2018

# State of Maine Health Inspection Report Establishment Name COWBELL GRILL & TAP License Expiry Date/EST. ID# Address City / State Zip Code 3/16/2019 / 19202 49 LISBON ST LEWISTON ME 04240

## **Observations and Corrective Actions**

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

23: 3-603.11.(A): C: There is no consumer advisory.

INSPECTOR NOTES: Menu lacking consumer advisory. Consumer advisory must be linked to food items that may be undercooked, ground beef, egg.

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: Many equipment surfaces have build up of grease, old food reminants. Clean and sanitize walls in dish area, prep tables, drain pipes of all sinks.

49: 5-205.15: C: Plumbing system not properly maintained in good repair.

INSPECTOR NOTES: Handsink and plumbing are free moving from wall. 3 bay sink and handsink have small leak. 3 bay sink has broken faucet handles, replace. Hire licensed plumber to fix handsink and all leaking plumbing.

54: 6-303.11: N: Insufficient lighting provided.

INSPECTOR NOTES: Waitstaff station has no light bulbs in receptacle. Install light bulbs with protective shielding or coating.

Person in Charge (Signature)

Health Inspector (Signature)
LOUIS LACHANCE



Date: 12/28/2018

### State of Maine Health Inspection Report Page 4 of 5 12/28/2018 Date **Establishment Name COWBELL GRILL & TAP** License Expiry Date/EST. ID# **Address** Zip Code City / State 3/16/2019 /19202 **49 LISBON ST** LEWISTON ME 04240

### **Inspection Notes**

\*\*This report is an identicle report from a New Operation inspection origionally completed on 12/18/18. The purpose of this report was to correct a wrong debit listed under 53: 6-501.11. The correct citation is 49: 5-205.15

OK to issue Eating Establishment license pending all violtions are corrected before opening.

Certified Food Protection Manager: Tyler Albert exp. 7/20/21

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired at the time of a new eating establishment opening or within 60 days of when a CFPM leaves employment. For a list of CFPM courses and trainers go to

http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, carol.gott@maine.gov or faxing to 207-287-3165.

Please include the name of your establishment and the establishment ID# with your certification(s).

### Employee Health Policy:

The Health Inspection Program has implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: http://www.maine.gov/healthinspection

### 2013 Maine Food Code Adoption:

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy, http://www.maine.gov/healthinspection. Following are a few of the major changes: \* No Bare Hand Contact with Ready-To-Eat Food. \* Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events. \* Date marking of Ready-to-eat potentially hazardous foods.

### **Violation Correction Timeframe:**

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact Louis Lachance when the critical violation has been addressed at 207-513-3125 extension 3224 or at llachance@lewistonmaine.gov. Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation:

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

### Additional Inspection Fee:

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting:

Person in Charge (Signature)	AMANI! ALL Marketis	Date: 12/28/2018
Health Inspector (Signature) LOUIS LACHANCE	Bour Karkame	

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	Pa	ge 5 of 5				
Establishment Name					Date	12/28/2018
COWBELL GRILL & TAP						
License Expiry Date/EST. ID# 3/16/2019 / 19202	Address 49 LISBON ST	City / State LEWISTON	ME	Zip Code 04240		

# **Inspection Notes**

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE



Date: 12/28/2018